


PTO/SB/31 (08-03)
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 393032012600	
In re Application of Hiroki NAKAZONO			
Application Number 09/515,905		Filed February 29, 2000	
For APPARATUS AND METHOD FOR SELECTING DATA SETS			
Art Unit 2173		Examiner B. Huynh	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 1.17(b))		\$ 330.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ RECEIVED	
<input type="checkbox"/> A check in the amount of the fee is enclosed.		MAR 1 2 2004	
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		Technology Center 2100	
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>03-1952</u> . I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
I am the			
<input type="checkbox"/> applicant /inventor		Signature	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		David Yang	
<input type="checkbox"/> attorney or agent of record. Registration number _____		Typed or printed name	
<input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). <u>44,415</u>		(213) 892-5587	
		Telephone number	
		March 2, 2004	
		Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input type="checkbox"/> *Total of _____ forms are submitted.			

03/10/2004 EAREGAY1 00000119 031952 09515905
02 FC:1401 330.00 DA

Adjustment date: 03/22/2004
03/10/2004 EAREGAY1 00000119 031952 09515905
02 FC:1401 330.00 CR